

POSITION	STAPLE	ID NO.	DATE
<b>FEE DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>	<i>John</i>	<i>946</i>	<i>2/26</i>
<b>FORMALITY REVIEW</b>	<i>LL</i>	<i>907</i>	<i>05-21-01</i>
<b>RESPONSE FORMALITY REVIEW</b>			<i>10-01-01</i>

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral) Canceled A ..... Appeal  
 ÷ ..... Restricted 0 ..... Objected

## Best Available Copy

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If more than 150 claims or 10 actions  
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2/26/01  
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